

UNITED STATES HOUSE OF REPRESENTATIVES
ETHICS IN GOVERNMENT ACT

2017 FINANCIAL DISCLOSURE STATEMENT - FORM A

Please provide the following information. Your address and signature WILL NOT be made available to the public.

Pamilyn Scott Miller 226-1097
(Print Full Name) (Daytime Telephone)

2362A RthB, Washington, DC 20515
(Complete Address - Office or Home)

Filer Status:

☐

Member

☒

Officer or Employee

CERTIFICATION - THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The attached Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Ethics or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file, the attached report may be subject to civil penalties and criminal sanctions. See section 104 of the Ethics in Government Act (5 U.S.C. app. §§ 101-111) and 18 U.S.C. § 1001.

Certification	Signature of Reporting Individual	Date
I CERTIFY that the statements I have made on the attached financial disclosure statement and all attached schedules are true, complete, and correct to the best of my knowledge and belief.	<u>Pamilyn Scott Miller</u>	<u>5-15-18</u>

Members must file a signed original and two photocopies thereof.

Officers and Employees must file a signed original and one photocopy thereof.

FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW

Certification	Signature of Certifying Official	Date
It is my opinion, based on the information contained in this Financial Disclosure Statement, that the reporting individual is in compliance with title I of the Ethics in Government Act (5 U.S.C. app. §§ 101-111).		

UNITED STATES HOUSE OF REPRESENTATIVES
2017 FINANCIAL DISCLOSURE STATEMENT

Form A
 For Use by Members, Officers, and Employees

(Office Use Only)

A \$200 penalty shall be assessed against any individual who files more than 30 days late.

Name: Pamelyn Scott Miller Daytime Telephone: 224-1097

FILER STATUS	<input type="checkbox"/> Member of the U.S. House of Representatives	State: _____ District: _____	<input checked="" type="checkbox"/> Officer or Employee	Employing Office: <u>Appropriations Committee</u>	Staff Filer Type: (If Applicable) Shared <input type="checkbox"/> Principal Assistant <input type="checkbox"/>
	<input checked="" type="checkbox"/> 2017 Annual (Due: May 15, 2018)	<input type="checkbox"/> Amendment			
REPORT TYPE					

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$390 in value from a single source during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	

IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS

IPO - Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
EXEMPTION - Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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Use additional sheets if more space is required.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Pamilyn S. Miller

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BLOCK A Assets and/or Income Sources		BLOCK B Value of Asset													BLOCK C Type of Income							BLOCK D Amount of Income												BLOCK E Transaction				
SP, DC, JT	ASSET NAME	EF	A	B	C	D	E	F	G	H	I	J	K	L	M	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	P, S, S(part), or E		
	Morgan Stanley IRA (cont)																																					
	- Fundamental Investors- America's Accounts- See pages 4 and 5 (This includes the Variable Annuity on page 5.)																																					

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See instructions for required information.

Filer's Name Family S. Miller - Ameriprise Accounts Page Number

Part 2: Filer's Employment Assets & Income and Retirement Accounts

#	Description	EIF	Value	Income Type	Income Amount
1.	BROOKFIELD ASSET MANAGEMENT INC VOTING SHS CL A	N/A	\$15,001 - \$50,000	Dividends	\$201 - \$1,000
2.	COLUMBIA GLOBAL INFRA CL C	Y	\$1,001 - \$15,000	Dividends and Long Term Capital Gains	\$201 - \$1,000
3.	FIDELITY ADVISOR NEW INSIGHTS CL A	Y	\$1,001 - \$15,000	Dividends and Long Term Capital Gains	\$201 - \$1,000
4.	FRANKLIN MUTUAL GLOBAL DISCOVERY CL A	Y	\$1,001 - \$15,000	Dividends, Short & Long Term Cap Gns	\$201 - \$1,000
5.	HOWARD HUGHES CORP	N/A	\$1,001 - \$15,000		None (or less than \$201)
6.	IVA WORLDWIDE CL A	Y	\$15,001 - \$50,000	Dividends, Short & Long Term Cap Gns	\$1,001 - \$2,500
7.	KINETICS GLOBAL CL C	Y	\$1,001 - \$15,000		None (or less than \$201)
8.	KINETICS PARADIGM CL C	Y	\$15,001 - \$50,000		None (or less than \$201)
9.	LIBERTY BROADBAND CORP SER C	N/A	\$1,001 - \$15,000		None (or less than \$201)
10.	LIBERTY GLOBAL PLC CL A	N/A	\$1,001 - \$15,000		None (or less than \$201)
11.	LIBERTY LATIN AMERICA (NAME CHANGE FROM LIBERTY GLOBAL PLC LIAC SHARES CL A)	N/A	None (or less than \$1,001)		None (or less than \$201)
12.	LIBERTY MEDIA CORP DEL SER A SIRIUSXM GROUP	N/A	\$1,001 - \$15,000		None (or less than \$201)
13.	LIBERTY MEDIA CORP DEL SER C SIRIUSXM GROUP	N/A	\$1,001 - \$15,000		None (or less than \$201)
14.	LIBERTY MEDIA CORP SER A BRAVES GROUP	N/A	None (or less than \$1,001)		None (or less than \$201)
15.	LIBERTY MEDIA CORP SER C BRAVES GROUP	N/A	None (or less than \$1,001)		None (or less than \$201)
16.	LIONS GATE ENTERTAINMENT CORP CL B NON VOTING	N/A	\$1,001 - \$15,000		None (or less than \$201)
17.	MATTHEWS ASIA GROWTH & INCOME INVESTOR CL	Y	\$1,001 - \$15,000	Dividends and Long Term Capital Gains	\$201 - \$1,000
18.	NEUBERGER BERMAN LONG SHORT CL A	Y	\$15,001 - \$50,000		None (or less than \$201)
19.	OAKMARK EQUITY & INCOME INVESTOR CL	Y	\$15,001 - \$50,000	Dividends, Short & Long Term Cap Gns	\$1,001 - \$2,500

See top of page 5

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Use additional sheets if more space is required.

Instructions for Part 7

Note: This is a public form. Do not include account numbers, street addresses, or family member names. See Instructions for required information.

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Filer's Name Pamelyn S. Miller Amesbury Accounts Page Number

Part 7: Transactions

#	Description	Type	Date	Amount
1.		purchase	Multiple: 1/3/17; 2/1/17; 3/1/17; 4/3/17	\$1,001 - \$15,000
2.	TETON WESTWOOD MIGHTY MITES (EIF)	purchase	1/19/17	\$1,001 - \$15,000
3.	SOURCE CAPITAL INC (EIF)	sale	1/19/17	\$1,001 - \$15,000
4.	WESTERN ASSET MANAGED MUNI	purchase	Multiple: 4/18/17; 7/14/17; 8/25/17	\$1,001 - \$15,000
5.	TEXAS PACIFIC LAND TRUST	purchase	7/14/17	\$1,001 - \$15,000
6.	LIBERTY GLOBAL	purchase	7/14/17	\$1,001 - \$15,000
7.	COLUMBIA ACORN EMERGING MARKETS (EIF)	sale	7/14/17	\$15,001 - \$50,000
8.	ROYCE DIVIDEND VALUE	sale	8/25/17	\$1,001 - \$15,000
9.	VIRTUS WEALTH MASTERS	purchase	12/19/17	\$1,001 - \$15,000
10.	HOWARD HUGHES CORP	sale	12/19/17	\$1,001 - \$15,000
11.	LIBERTY FORMULA ONE SER C (FWONK)	sale	12/19/17	\$1,001 - \$15,000
12.	FRANKLIN MUTUAL GLOBAL DISCOVERY	purchase	7/14/17	\$1,001 - \$15,000
13.	OAKMARK GLOBAL SELECT (EIF)	sale	7/14/17	\$1,001 - \$15,000
14.	ROYCE INTERNATIONAL PREMIER	sale	7/17/17	\$1,001 - \$15,000
15.	GABELLI FOCUS FIVE		7/19/17	\$1,001 - \$15,000
16.	MERGER: LIBERTY FORMULA ONE SER C (FWONK) FROM LIBERTY MEDIA CO LIBERTY MEDIA CO		07/19/17	\$1,001 - \$15,000
17.				
18.				

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INCOME LIMITS and PROHIBITED INCOME: The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.

Use additional sheets if more space is required